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TRANSMITTAL FORM

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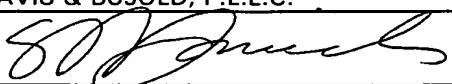
<div style="text-align: center;"> TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i> </div>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td style="width: 50%;">10/521,956</td> </tr> <tr> <td>Filing Date</td> <td>with an effective filing date of May 20, 2004</td> </tr> <tr> <td>First Named Inventor</td> <td>Peter LIGERTWOOD</td> </tr> <tr> <td>Group Art Unit</td> <td>3632</td> </tr> <tr> <td>Examiner Name</td> <td>Ramon O. RAMIREZ</td> </tr> <tr> <td>Total No. of Pages in this Submission: 13</td> <td>Attorney Docket Number ROCKCO P66AUS</td> </tr> </table>	Application Number	10/521,956	Filing Date	with an effective filing date of May 20, 2004	First Named Inventor	Peter LIGERTWOOD	Group Art Unit	3632	Examiner Name	Ramon O. RAMIREZ	Total No. of Pages in this Submission: 13	Attorney Docket Number ROCKCO P66AUS
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Group Art Unit	3632												
Examiner Name	Ramon O. RAMIREZ												
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ENCLOSURES (check all that apply)

<ul style="list-style-type: none"> <input checked="" type="checkbox"/> Fee Transmittal Form <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Fee attached <input checked="" type="checkbox"/> Response <ul style="list-style-type: none"> <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request (in Duplicate) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Part/s Incomplete Application <ul style="list-style-type: none"> <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 	<ul style="list-style-type: none"> <input type="checkbox"/> Assignment papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition (DELETED - no longer useful) <input type="checkbox"/> To Convert a Provisional Petition <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund 	<ul style="list-style-type: none"> <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below): Postcard
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REMARKS

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name	Scott A. DANIELS DAVIS & BUJOLD, P.L.L.C.	Reg. No. 42,462 CUSTOMER NO. 020210
Signature		
Date	November 30, 2006	

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on November 30, 2006.

Type or printed name	Scott A. DANIELS
Signature	
Date: November 30, 2006 (Lfb)	